

William Alexander

Town nor Risin Sun County cecel 6th dist
Died at MARYLAND

Died at	Month	Day	Y.	M.	D.	Native of	Occupation
Date 1902	8	8	-	3	5	nor.	-
Male	White	Married		Widow	Divorced		
Female	Colored	Single		Widower	Number of children living	6	

Husband of

Wife

Father's Name

David Abram

Mother's Maiden Name

Nora Green

Cause of Death

Primary Tuberculosis

How long sick
4 days

Death

Immediate

Exhaustion, 105

Accident, Suicide, Homicide

Reported by

Dr. J. B. Shinn

Address

Rising Sun

MD

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Joseph E Blawfield

Town

County

Died at

Chesapeake City

MARYLAND

Month

Day

Y.

M.

D.

Native of

Date 1902

8 14

- 1 16

Md

Occupation

Male

White

Married

Widow

Divorced

Father

O

Single

Widower

Number of children living

Husband

of X

105

Wife

Father's Name

Howard E Blawfield

Mother's Maiden Name

Cassia C. Prescott

Cause of

Primary

cholera Infestation

How long sick

Death

Immediate

Diphtheria

Accident, Suicide, Homicide

Reported by

EBC Karsner, M.D.

Address

Chesapeake City, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



<i>John W Bond</i>					
Town	County				
Balt. - Detroit - Cinc					
Died at	Month Day		Y. M. D.	Native of	MARYLAND
Date 1892	Aug.	8	68 - 4 - 14		Occupation
Male <input checked="" type="checkbox"/>	Married <input checked="" type="checkbox"/>	Widow	Divorced	<i>Taxpayer</i>	
Female <input type="checkbox"/>	Colored <input checked="" type="checkbox"/>	Single	Widower	Number of children living	
Husband of	<i>Laura J Bond</i>		79		
Wife	<i>Frabotrod Bond</i>		<i>Elizabeth Bond</i>		
Father's Name					
Cause of Death	Primary		<i>Chronic Heart disease</i>		How long sick
	Immediate		<i>Dropped dead very sudden</i>		Accident Suicide, Homicide
Reported by	<i>Dr Samuel H Cox</i>				
Address	<i>Balt. Detroit</i> [Redacted] <i>103 A</i>				

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Mary Boodich 5-Diste

Town

County

MARYLAND

Died at

Elk Neck

Cecil

Month

Day

Y. M.

D.

Native of

Occupation

Date of

1902 Aug 21

Age

1951

Male

Widow

Divorced

Female

Widower

Number of children living

3

Husband

of

Michael Boodich

Wife

Father's

Name

Michael Boodich

Mother's

Mary Boodich

Cause of

Primary

Accident

How long sick

3 days

Death

Immediate

Rubbing Ulcer

Accident, Suicide, Homicide

Reported by

George S. Ribbeckhouse M.D.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Still Born - Girl

Died at Elk Neck Town Cecil County MARYLAND
 Date 1902 Aug 21 Month Aug Day 21 Y. — M. — D. — Native of Baltimore Occupation —
 Male — White — Age — Married Widow Divorced —
 Female — Colored — Single — Widower — Number of children living —

Husband of — Wife of — Father's Name Michael Bordich Mother's Name Mary Bordich
 Cause of Death Accident How long sick — Primary — Immediate — Accident, Suicide, Homicide —

Reported by Georgia S. Richardson Address Worth east 3rd



Name
in
Full

Willard Lewis Bradbury

CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died at	Town		County		MARYLAND		
Date of death 1902	Month Aug	Day 2	Years	Months	Days	6	20
Sex male	Color or Race White		Birth-place		Eckton Penna		
Married, Single or Widowed	Occupation		05				
Name of Wife or Husband							
Father's Name	Frank H Bradbury		Father's Birthplace		Eckton		
Mother's Maiden Name	Kemal M. Lewis		Mother's Birthplace		W Chester		
Name of person giving information	Frank H Bradbury		How related to deceased		Father.		

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Gastro-enteritis - colitis	How long	10 mths
Immediate	Gastro-enteritis	How long	—
Are the name, age, sex, color, date and place correctly given above?	yes	Signature of Physician	Frank Cooper
		Address	Eckton. Wis
Accident or Suicide?			



Sarah A Brown widow of Cephus Brown

Town

County

MARYLAND

Died at Ocean Point

Cecil

Date 189
1902

Month

Day

Y. M. D.

Native of

Occupation

Aug 26

Age

77.7. 31 Cecil Md.

Widow

Divorced

Male

White

Married

Female

Colored

Single

Widower

Number of children living

5

Husband of

Wife

Father's

Name

Mother's

Name

184

Cause of

Primary

Senile decay -

How long sick

Death

Immediate

doubtly -

3 years

Accident, Suicide, Homicide

Reported by

J. T. Wallace MD

Address

Chesapeake City
Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Infant of Lewis and Lera. Brown

Town

Fair-Heill

County

Cecil

(40 sic)

MARYLAND

Died at

Month

8

Day

3

Y.

M.

D.

Native of

Md

Occupation

Date 19

02

Male

White

Age

2

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

wife

Father's

Name

Lewis Brown

Mother's

Maiden Name

Lera. Island

How long sick

Cause of

Primary

Unknown

151

Accident, Suicide, Homicide

Reported by

David Mackay M.D.

Address

Louisville, Ky

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

{



Viola Criss (Infant)

Rock Run ^{Town} Port Deposit ^{County} East 6

Died at

MARYLAND

Date	Month	Day	Y.	M.	D.	Native of	Occupation
1902	Aug	18	Age	3 weeks		Port Deposit	
Mother	White		Married		Widow	Divorced	
Female	Colored		Single	X	Widower	Number of children living	105

Husband of

Wife

Father's Name

Lewis Criss

Mother's Maiden Name

Susan Jane Criss -

Cause of

Primary

diarrhea in Infancy

How long sick

Death

Immediate

about 10 day

Accident, Suicide, Homicide

Reported by

R. E. Bromwell M.D.

Address

Port Deposit [redacted] Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Rachel E. Drupsky

Town

County

Oakwood

Cecil 8th Dist

MARYLAND

Died at

1902

Month

Day

Y.

M.

D.

Native of

Occupation

Date of

8

18

38.

- -

-

Cecil Co. Dressmaker

Male

White

Married

Widow

Divorced

Female

Single

Single

Widower

Number of children living

Wife

Robert J. Drupsky.

Father's

John Lennon

Mother's

Name

27 Smith.

Cause of

Primary

Tuberculosis

How long sick

our year.

Death

Immediate

Exhaustion

the last 6 months

Reported by

J B Slein

'Resy [redacted] Seeu dat,

Address

Oakwood Cemetery

215X

Name in Full

Thomas Foyce

Certificate of Death

3rd sick

Died at

Town

Cherry Hill

County

MARYLAND

Date 1802

Month

Day

Y.

M.

D.

Native of

Occupation

Male

White

Age
Married

Widow

Divorced

Female

Gained

Number of children living

3

Husband of

Margret Grant

Wife

Sarah Foyce

Father's Name

David Foyce

Mother's Name

Cause of

Primary

Convalescence of disease 2 months

How long sick

Death

Immediate

Exhaustion

Accident, Suicide, Homicide

Reported by

Jas. S. Whitaker

79

Address

Cherry Hill Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

4-8



Benjamin, A. S. Giffin

Town

County

Died at

MARYLAND

Date 189

Month Day

Y. M. D.

Native of

Occupation

Male

Age

Married

Widow

Divorced

Female Colored Single

Widower

Number of children living

Husband
of

30

Wife

Father's

Name

Mother's

Name

Cause of

Primary

How long sick

Death

Immediate

Sept 1891

2 days

Reported by

Infused. Wm. F. Knott

Accident Suicide Homicide

Address

W. 1st Street, Park.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



John Warren, Deceased						6th Dist	
Died at	Baltimore		Town	County			MARYLAND
Date 1902	Month 8	Dey 11	Age	Y. M. D.	Native of	Occupation	
Male	White	Married		Widow	Divorced		
Female	Colored	Single		Widower	Number of children living		
Husband of							
Wife							
Father's Name	John Harris		Mother's Maiden Name	Phoebe Riale			
Cause of Death	Primary	Lorisillitis					How long sick
	Immediate	Bacillary Enteritis					40 Years
Reported by	Lester Darr						Accident, Suicide, Homicide
Address	Baltimore						

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Laura V. Nessey

Town

County

MARYLAND

Died at

Cecilton

Cecil

1902

Month

Day

Y. M. D.

Age

73

Native of

Cecil

Occupation

Housewife

Date of

Aug 1st

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Two

Husband of

John H. Nessey

Wife

Mother's Name

Father's

Name

Cause of

Primary

How long sick

48 hours

Death

Immediate

let

over

Accident, Suicide, Homicide

Reported by

Annie G. Johnson

Cecilton, Md.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Attended by Dr. _____

[Handwritten signature]

Seen by Coroner _____

of _____

Information contained in this certificate received from _____

of _____

Arthur H. Severen

Town

County

Died at

North East

MARYLAND

Date 19

02

Month

Day

Y.

M.

D.

Native of

Male

White

Age

Married

1

Widow

Divorced

Occupation

Female

Colored

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

John Severen

Mother's
Maiden Name

Esther Abbott

Cause of

Primary

Congestion of brain

How long sick

38 hours

Death

Immediate

Accident, Suicide, Homicide

Reported by

Geo. A. Horrall

Address

North East

Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Yola Florence Hughes

Town

County

Died at Cayote Corner

Y. Cecile

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902

Aug 23

10

Md

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Joseph Hughes

Mother's

Maiden Name

179

Emma - (dead)

How long sick

Cause of

Primary

Mother died of Consumption Since Birth

Death

Immediate

Just after its birth -

Accident, Suicide, Homicide

Reported by

Did not have any medicine attendant

Address

Dr J W Wallace

Chesapeake City Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



11



George A. Jones		County		Cecil		7th Dist 183	
Died at New Valley				MARYLAND			
Month Day		Y.	M.	D.	Native of		Occupation
Date 1902 Aug 17		Age 42	10	24	Md.		Painter
Male White		Widow		Divorced		Number of children living	
Cured		Widower					
Single							
Husband of							
Wife							
Father's Name		Mother's Maiden Name		Vianna Millard			
Cause of Death		Primary		Acute Pulmonary Tuberculosis		How long sick	
Death		Immediate		Exhaustion		One year	
Reported by		Conest. Rowland		97		Accident, Suicide, Homicide	
Address		Liberty - Town, Md					

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Mary E. Laree.

Town

County

Died at

Port Deposit

MARYLAND

Died at	Month	Day	Y. M. D.	Native of	Occupation
Date 1902	Aug. 5				
Mate	Age				
Female	Married	46.	Augt Maryland	House work	
	White		Widow	Divorced	
	Colored		Widower		Number of children living
					1

Husband of

George Laree, Father Maryland

Wife

Mother's

Father's

Henry Laree,

Maiden Name

Amelia Deason

Name

Cause of

Primary

Acute Bright's disease about 6 months

How long sick

Death

Immediate

Dropsy

Accident, Suicide, Homicide

Reported by

Dr. Linscott H. Cox

179

Address

Port Deposit

Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

Sarah Jane Lewis

CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died at	Town	Cecil		County	MARYLAND	
Date of death 1902	Month Aug	Day 23	Age 85	Years	Months	Days
Sex Female	Color or Race	White		Birth-place	Cecil Co	
Married, Single or Widowed	Occupation	Housewife				
Name of Wife or Husband		George Lewis				
Father's Name	Thomas Taylor			Father's Birthplace	Cecil	
Mother's Maiden Name	E. Myer			Mother's Birthplace	Cecil	
Name of person giving information	J. B. Graham		1st	How related to deceased	nony	

PHYSICIAN
OR CORONER

CAUSES OF DEATH

Primary

General debility

How long

3 months

Immediate

How long

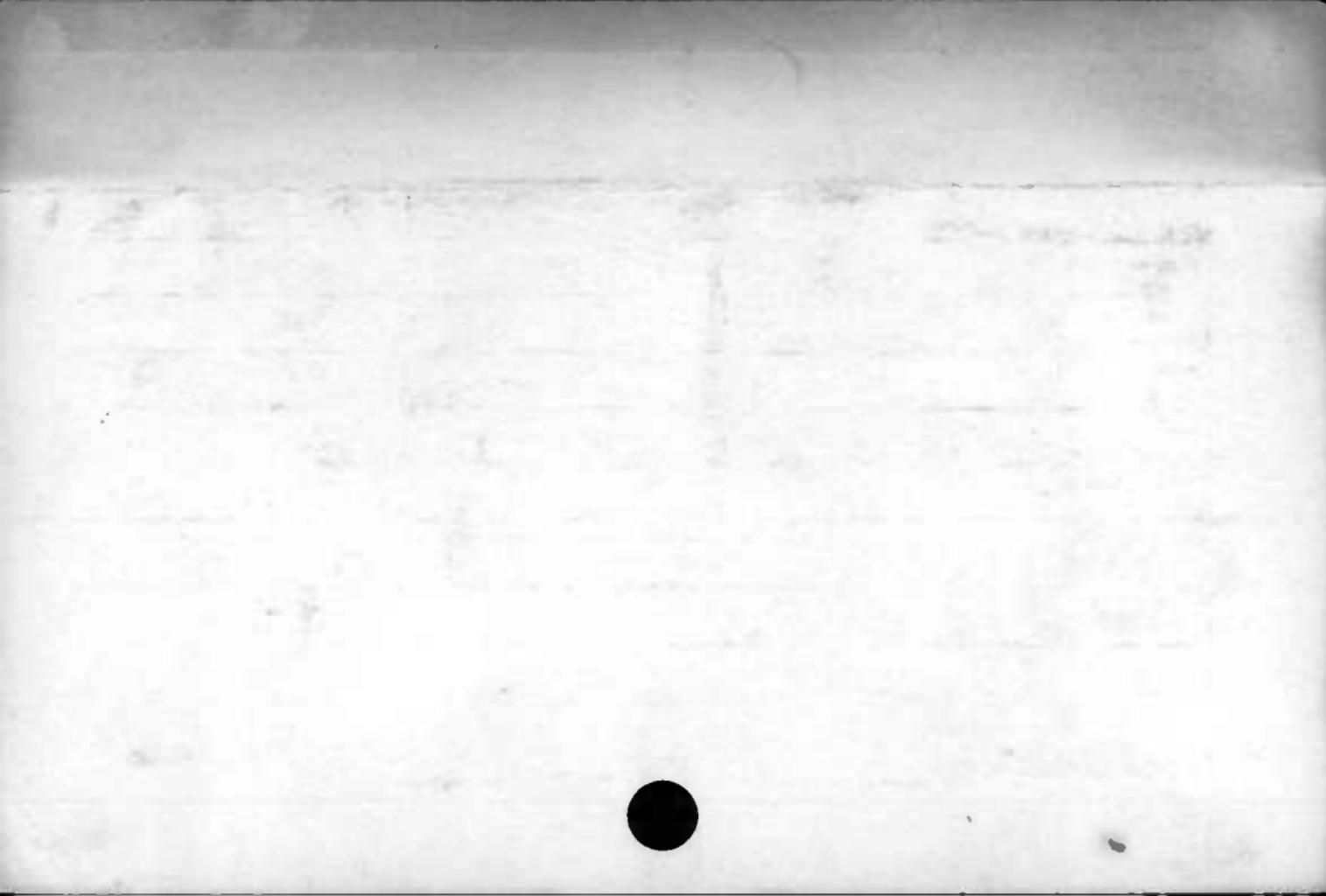
Are the name, age, sex, color, date and place correctly given above?

Signature of Physician

Address

Baltimore
North Eas

Accident or Suicide?



Mary Linton

Town

County

Principio

Cecil

MARYLAND

Died at

Date 1902

Month 8

Day 3

Y.

M.

D.

Native of

Cecil Co

Occupation

Housewife

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

John L Linton

Mother's

Name

or?

Annie Luckland

Cause of

Primary

Consumption

How long sick

12 months

Death

Immediate

Heart Failure re. Anemia

Accident, Suicide, Homicide

Reported by

H. C. Brown, M.D.

Address

Principio Ind.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

Lipman

CERTIFICATE OF DEATH

To BE ANSWERED BY
NEAREST FRIEND

Died at	Town		County		MARYLAND		
Date of death 1907	Month aug	Day 22	Age	—	Months	—	Days
Sex Male	Color or Race		White		Birth- place	Elkton	
Married, Single or Widowed			Occupation				
Name of Wife or Husband							
Father's Name	Michael Lipman				Father's Birthplace	Phila Pa	
Mother's Maiden Name	Theresa Hoffman				Mother's Birthplace	Phila Pa	
Name of person giving Information	Theresa Lipman				How related to deceased	Grand- Mother	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary *Still born* How long

Immediate *Protrusion of cord; uterine, mother* How long

Are the name, age, sex, color, date
and place correctly given above?

Yes

Signature of
Physician

Howard Bratton

Address

Elkton Md

Accident or Suicide?



Name
in
Full

Dunbar Morgan

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at <u>Elkton</u>		Town	County <u>Cecile</u>	MARYLAND	
Date of death 1902	Month <u>Aug</u>	Day <u>1</u>	Years <u>Age 72</u>	Months	Days
Sex <u>Male</u>	Color or Race <u>white</u>	Birth-place <u>Elkton Md</u>			
Married, Single or Widowed	Occupation <u>Blacksmith</u>				
Name of Wife or Husband	<u>Alice Morgan</u>				
Father's Name	<u>Thos. Morgan</u>				
Mother's Maiden Name	<u>Elizabeth Kershores</u>				
Name of person giving Information	How related to deceased				

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

How long

Immediate Carcinoma (?) of Stomach

How long

6 mo +

Are the name, age, sex, color, date and place correctly given above?

Signature of physician

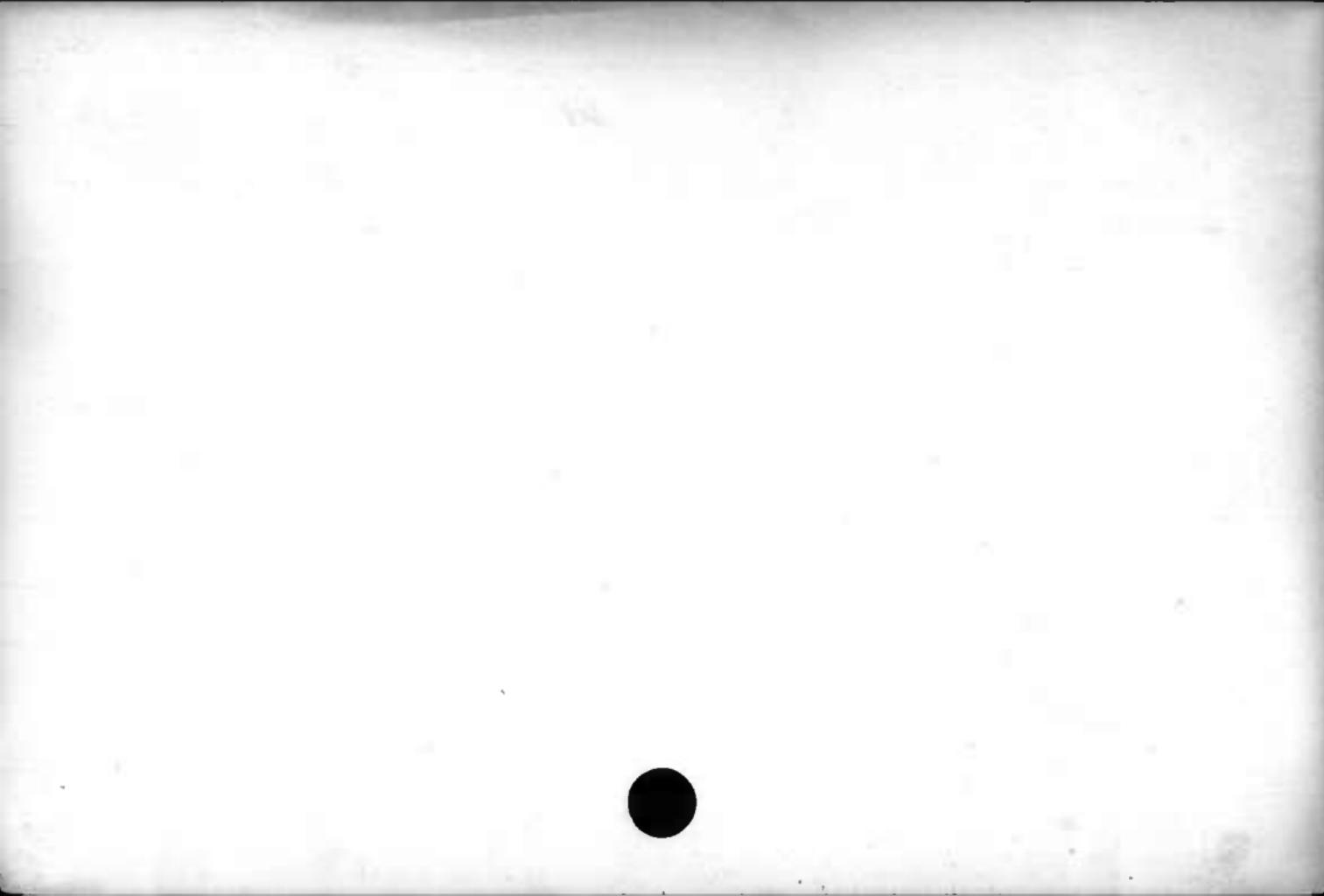
Address

H. Arthur Nitely

Elkton Md.

Elkton Md.

Accident or Suicide?



Worley Hickie

Died at Colona Town

Cecil County

6th Street

MARYLAND

Died 1902	Month	Day	Age	Y. M. D.	Native of	Occupation
	5.	18	78			
Male	White	Married		Widow	Betrored	
Female	Colored	Single		Widower	Number of children living	2

Husband of	<u>Hanna Hickie</u>
Wife	<u>not known</u>
Father's Name	<u>not known</u>
Mother's Maiden Name	<u>not known</u>

Cause of Death	Primary: <u>organic heart disease</u>	How long sick
	Immediate	1 year
		Accident, Suicide, Homicide

Reported by	<u>RR Crothers</u>
Address	<u>Colona Md</u>
	<u>RR Crothers</u>

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Grace Marie Rea

Pilot -

County

8th

MARYLAND

Died at

Date 1902

Month Aug Day 27

Y.

M.

D.

Native of

Male

7.27

U.S.

Female

White

Age

Widow

Divorced

Married

Widower

Occupation

Single

Number of children living

Husband of

Wife

Father's Name

John E. Rea

Mother's Maiden Name

Eliz. Mary Oakley

Cause of

Primary

Tuberculosis

How long sick

Death

Immediate

Acute Diarrhoea

always delicate

one week

Accident Suicide, Homicide

Reported by

Geo W. Gillespie M.D.

Address

Pleasant Grove

Pa

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name
in
Full

Elizabeth B Reese

CERTIFICATE OF DEATH

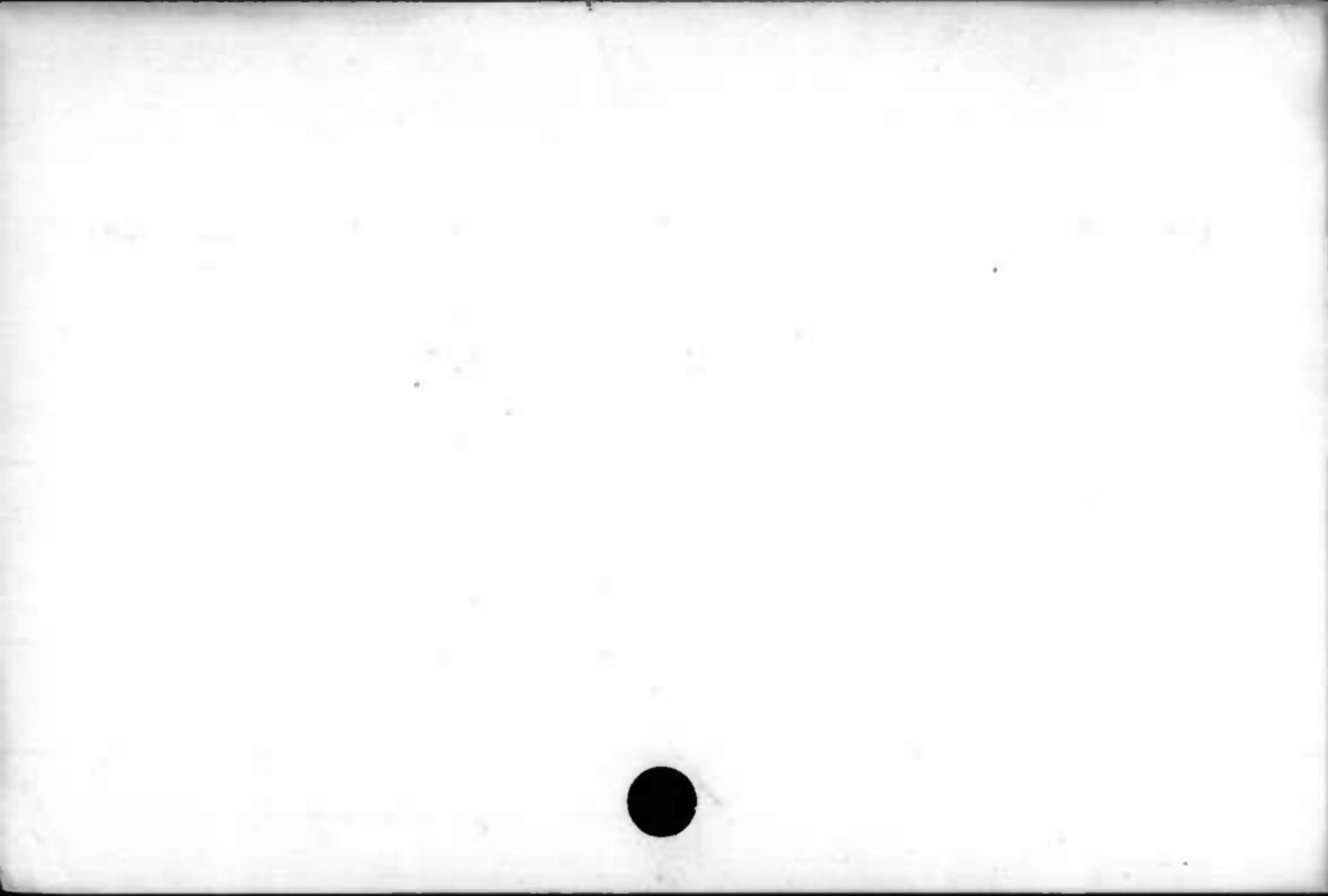
TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town	Eckton	County	MARYLAND	
Date of death 1902	Month	Aug	Day	24	Years
Sex	Funeral	Color or Race	white	Birth-place	Eccles Co
Married, Single or Widowed	widowed			Occupation	
Name of Wife or Husband	Richard L Reese				
Father's Name	James McCauley			Father's Birthplace	41
Mother's Maiden Name	Mary Beard			Mother's Birthplace	
Name of person giving information	H W Reese			How related to deceased	Son

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Carcinoma of rectum		How long
			several years
Immediate			How long
Are the name, age, sex, color, date and place correctly given above?	Yes	Signature of Physician	H. Arthur Mitchell M.D.
		Address	Elkton Md.
Accident or Suicide?	V		



Name
in
Full

Bonah E Riley

3 birth

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at	Town	County	MARYLAND
Died at	Baltimore	Cecil	
Date of death 1902	Month ang	Day 16	Years
Sex Girl	Color or Race white	Age	Months 7
Married, Single Widowed	Occupation		
Name of Wife or Husband			
Father's Name	Frank Riley	179	Father's Birthplace Md
Mother's Maiden Name	Nellie Simson		Mother's Birthplace Md
Name of person giving information	Alfred Kershaw		How related to deceased Uncle

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary

Inanition

How long

5 mos

Immediate

How long

Are the name, age, sex, color, date and place correctly given above?

yes

Signature of Physician

Address

Jesse, Cooperson,
Elkton, Md

Accident or Suicide?

2-8

Elizabeth Peleg

Died at Town County MARYLAND
Dear Cecilton CecilDied at Town County MARYLAND
Dear Cecilton Cecil

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Lawrina Scott, 8th Dist

Died at Cecil Paper Mills County Cecil Town Maryland

Date 1902	Month 8	Day 16	Y. 73	M. -	D. -	Native of Md	Occupation House Wife
Male	White	Married		Widow	Divorced		
Female	Colored	Single		Widower	Number of children living	2	

Husband of Geo Scott

Father's Name

Mother's Maiden Name

Hannah Scott

Cause of Primary Heart Disease

How long sick

2 hours

Death Immediate

Accident, Suicide, Homicide

79

Reported by Geo S. Davis

Address Rising Sun  Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Bruey C Smith, colored

near Town
Died at RowlandsvilleCounty
Cecil

8th dist

MARYLAND

Date 1902	Month Aug	Day 13	Y. 72	M. -	D. -	Native of U.S	Occupation Saloon
Male	White	Married	Widow	Divorced			
Female	Colored	Singler	Widower	Number of children living			4

Husband of May C Smith

Wife Father's
Name

Druy Smith

Mother's
Maiden Name

Not Known

Cause of Death

Primary

Mitral Regurgitation & Heart 24 years

How long sick

Immediate

Exhaustion

Accident, Suicide, Homicide

Reported by

Cecil Rowland 74

Address

Liberty Grove, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Name
in
Full

TO BE ANSWERED BY
NEAREST FRIEND

Spence				CERTIFICATE OF DEATH		
Died at		Town	County		MARYLAND	
Date of death	1902	Month Aug	Day 19	Years	Months	Days
Sex	male	Color or Race	white	Age	Birth-place	Elkton Md
Married, Single or Widowed		Occupation				
Name of Wife or Husband		72				
Father's Name	Edgar Spence				Father's Birthplace	
Mother's Maiden Name	Carrie Whibley				Mother's Birthplace	
Name of person giving information	Mrs Josie Spence				How related to deceased	

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary *Don't know* How long

Immediate *Tetanus* How long *2 1/2 days*

Are the name, age, sex, color, date and place correctly given above?

Yes

Signature of Physician

Address

*Innes, Cooper & Son
Elkton, Md*

Accident or Suicide?



Alfred D. Standley

Town

County

Died at

Chesapeake City - Cecil

MARYLAND

Date 1902

Month

Day

Y.

M.

D.

Age

- 6 - 7

Native of
[redacted] Ma

Occupation

Infant

Male

White

Widow

Divorced

[redacted]

[redacted]

Widower

Number of children living

Husband of

Wife

Father's

Name

Hos & Standley

105

Mother's

Maiden Name

May a Wharton

Cause of

Primary

How long sick

5 days

Death

Immediate

cholera infantum

Accident, Suicide, Homicide

Reported by

760 Karsner Rd

Address

Chesapeake [redacted] City Ma

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Colmar
Ruth

Julia Stokes 6th Dist.

Town

Rosedale

County

Baltimore Co

MARYLAND

Died at

Month

Day

Y.

M.

D.

Native of

Date 1902

Aug 26

Age

46

Occupation

Housekeeper

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

4

Husband of

Julia Stokes

Wife

Father's

Name

George Washington

Mother's

Maiden Name

Catharine Washington

Cause of

Primary

A weak disease

How long sick

1 year

Death

Immediate

Accident, Suicide, Homicide

Reported by

S. B. T. & Co. Undertakers

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Address

Colona rd



Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

had no Physician
since last fall.

(This warty disease was
the result of the change of
life, so the undertaker says.
This is all the information
I can get. Will record it
as Cause "unknown" 1673)

Mary E. Naters

Town Warwick County Cecil MARYLAND

Died at

Date	Month	Day	Y.	M.	D.	Native of	Occupation
1902	Aug	16	3			Md	
	Male	White		Married		Widow	Divorced
	Female	Colored		Single		Widower	Number of children living

Husband of

Wife

Father's Name

Libert Naters

Mother's Maiden Name

Mary Rhodes

Cause of

Primary

Cholera Infantum

How long sick

10 days

Death

Immediate

05

Accident, Suicide, Homicide

Reported by

J J Wright MD
Warwick Md

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full		14 dish;		Certificate of Death	
Mary E Willis					
Died at ^{Town} Big Eek chapel		^{County} cecil		MARYLAND	
Date 1902	Month Aug	Day 2	Y. 72	M. 72	D. 72
Male	White	Married	Native of	nd	Occupation
Female	Colored	Single	Widow	Divorced	House work
Husband of	Jas K Willis		Number of children living	9	
Wife	Ruby Segars		Mother's	Margaret Brajne	
Father's Name			Maiden Name		
Cause of Death	Primary	Bright disease	How long sick	3 months	
	Immediate		Accident, Suicide, Homicide		
Reported by	J.S. Whitaker				
Address	Sherry Hill		nd		

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Sarah R. A. Worrell

Town *North East* County *Cecil* MARYLAND

Died at *1902* Month *Aug* Day *28* Y. *53* M. *W* D. *W* Native of *Md.* Occupation *—*

Date *1902* Month *Aug* Day *28* Age *53* Sex *Female* Native of *Md.* Number of children living *none*

Male *White* Married *Married* Widow *W* Widower *W*

Female *Colored* Single *Single* Widower *W*

Husband of *Theo A. Worrell*

Wife *—* Mother's Name *Ruth M. Corack*

Father's Name *Richard L. Thomas*

Mother's Name *—*

Cause of Death *Primary* *Cancer* How long sick *One Year*

Death *Immediate* *—* *45* Accident, Suicide, Homicide *—*

Reported by *Theo A. Worrell M.D.*

Address *North East Md.*

